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# FACSIMILE TRANSMITTAL COVER SHEET

DATE: <u>April 12, 2005</u> ATT PTO FACSIMILE NUMBER: (703) 872-	ORNEY DOCKET NUMBER: KCC 4775 9306
PLEASE DELIVER THIS FACSIMILE TO THIS FACSIMILE IS BEING SENT BY: NUMBER OF PAGES: 3 INC	: Examiner Michele M. Kidwell Christopher M. Goff LUDING COVER SHEET
time sent: <u>234pm</u> opera	TOR'S NAME Daphne H. Moore
CERTIFICATION OF FA	CSIMILE TRANSMISSION
I hereby certify that this paper the Patent and Trademark Office	is being facsimile transmitted to on the date shown below.
Daphne H. Moore	
Typed or printed name of person	signing certification
Nashre H. Moore	April 12, 2005
Signature (	Date
Type of paper transmitted: Noti	ce of Appeal
Applicant's Name: <u>Kimberly-Clar</u>	k Worldwide, Inc.
Serial No. (Control No.): 09/99	8,500 Examiner: Kidwell
Filing Date: November 30, 2001	Art Unit: 3761
Application Title: BREAST PAD	ASSEMBLY CONTAINING A SKIN
BENEFIT INGREDIENT	

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KCC 4775 (K-C 17,129) PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of Beth Anne Lange Art Unit 3761 Serial No. 09/998,500 Filed November 30, 2001 Confirmation No. 6529 FOR BREAST PAD ASSEMBLY CONTAINING A SKIN BENEFIT INGREDIENT Examiner Michele M. Kidwell

April 12, 2005

# NOTICE OF APPEAL FROM THE PRIMARY EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

COMMISSIONER FOR PATENTS P.O. BOX 1450 ALEXANDRIA, VIRGINIA 22313-1450

SIR:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the Examiner dated January 26, 2005, rejecting the following claims: 1-71.

The Commissioner is hereby authorized to charge Deposit Account No. 19-1345 the appeal fee of \$500.00. If there are any additional charges in this matter, please also charge Deposit Account No. 19-1345.

Respectfully Submitted,

Christopher M. Goff, Reg. No. 41,785

Senniger Powers

One Metropolitan Square, 16th Floor

St. Louis, Missouri 63102

314-231-5400

CMG/JMB/dhm

## FEE TRANSMITTAL

Application Number 09/998,500
Filing Date November 30, 2001
Confirmation No. 6529
Inventor(s) Beth Anne Lange
Group Art Unit 3761
Examiner Name Kidwell
Attorney Docket Number KCC 4775 (K-C No. 17,129)

#### METHOD OF PAYMENT

- 1. [X] The Commissioner is hereby authorized to charge the indicated fees to Deposit Account No. 19-1345.
  - [X] The Commissioner is hereby authorized to charge any additional fees required under 37 CFR 1.16 and 1.17 to Deposit Account No. 19-1345.
  - [ ] Applicant claims small entity status.
- 2. [] Check Enclosed. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

### FEE CALCULATION

1.	[ ]	BASIC FILING FEE Subtotal (1) \$(Type:)
2.	[ ]	EXTRA CLAIM FEES Subtotal (2) \$  Total Claims
		Independent Claims Multiple Dependent Claims
3.	[X]	ADDITIONAL FEES Subtotal (3) \$ 500.00
		<pre>[] Surcharge - late filing fee or oath [] Surcharge - late provisional filing fee or cover sheet [] Extension for reply within month [X] Notice of Appeal [] Filing a Brief in Support of an appeal [] Request for ex parte Reexamination [] Petitions to the Commissioner [] Submission of Information Disclosure Statement [] Recording each patent assignment per property [] Request for Continued Examination [] Other:</pre>
TOTAL	. H	UNT OF PAYMENT \$ 500.00

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